POLICY & PROCEDURE

SUBJECT: Trauma Criteria (Elmer, Mullica Hill, Vineland)

DEPT: EMERGENCY ROOM

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EFFECTIVE Date: 08/25/2021

REVIEW Date: 08/31/2021

I. POLICY

To establish criteria for consideration of transfer to a Trauma Center.

II. RESPONSIBILITY

A. Emergency Physician / Resident / Advanced Practice Clinician

B. Emergency Nursing staff

III. PROCEDURE

A. Patients presenting with a traumatic injury will receive a medical screening exam by the Emergency Physician / Resident / Advanced Practice Clinician. (See also ER. 81 Medical Screen Exam)

B. Additional services may be consulted at the Emergency Physician / Resident / Advanced Practice Clinician discretion.

C. Criteria for Consideration of Transfer:

- 1. Carotid or vertebral arterial injury.
- 2. Torn thoracic aorta or great vessel.
- 3. Cardiac rupture.
- 4. Bilateral pulmonary contusion with significant hypoxemia. .
- 5. Major abdominal vascular injury.
- **6.** Grade IV or V liver injuries requiring transfusion of more than 6 U of red blood cells in 6 hours.
- **7.** Unstable pelvic fracture requiring transfusion of more than 6 U of red blood cells in 6 hours.
- **8.** Fracture or dislocation with loss of distal pulses.
- **9.** Penetrating injuries or open fracture of the skull.
- 10. Glasgow Coma Scale score of less than 14 or lateralizing.
- 11. Potentially unstable spinal fracture or spinal cord deficit.
- **12.** Complex pelvis/acetabulum fractures.
- **13.** More than two unilateral rib fractures or bilateral rib fractures with pulmonary contusion (if no critical care consultation is available).
- **14.** Significant torso injury with advanced comorbid disease (such as coronary artery disease, chronic obstructive pulmonary).

(Resources for Optimal Care of the Injured Patient: 2014, Committee on Trauma, American College of Surgeons 2014)

IV. REFERENCES

- Admission of Patient ER.8
- Transfer of Patient NUR.1.06 / ER.10
- Discharge / Referral Procedure ER.11
- American College of Surgeons Criteria for Consideration of Transfer

